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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 167244

1. Corporation Name
FERMAN MOTOR CAR COMPANY, INC.

Principal Place of Business P.O. BOX 1321 TAMPA FL 33601	Mailing Address P.O. BOX 1321 TAMPA FL 33601
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/03/1951	4. FEI Number 59-0240570	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

2. Principal Place of Business 21 1306 W Kennedy Blvd	2a. Mailing Address 26 1306 W Kennedy Blvd
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Tampa, FL	City & State 28 Tampa, FL
Zip 24 33606-1849	Country 25
Zip 29 33606-1849	Country 30

9. Name and Address of Current Registered Agent STRASKE, STEPHEN B II 1307 W KENNEDY BLVD TAMPA FL 33606	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1306 W Kennedy Blvd 83 84 City Tampa FL 85 Zip Code 33606-1849
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE VASD	NAME FARRIOR, PRESTON L	1.1 TITLE VP	1.2 NAME James E Brakeman
STREET ADDRESS 1307 W KENNEDY BLVD.	CITY-ST-ZIP TAMPA FL 33606	1.3 STREET ADDRESS 1306 W Kennedy Blvd	1.4 CITY-ST-ZIP Tampa, FL 33606-1849
TITLE STD	NAME STRASKE, STEPHEN B II	2.1 TITLE	2.2 NAME
STREET ADDRESS 1307 W KENNEDY BLVD.	CITY-ST-ZIP TAMPA FL 33606	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE VP	NAME BRAKEMAN, JAMES E	3.1 TITLE	3.2 NAME
STREET ADDRESS 1307 W KENNEDY BLVD.	CITY-ST-ZIP TAMPA FL 33606	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE D	NAME FERMAN, CECELIA D.	4.1 TITLE	4.2 NAME
STREET ADDRESS 1307 W KENNEDY BLVD.	CITY-ST-ZIP TAMPA FL 33606	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE D	NAME JANICE F. STRASKE	5.1 TITLE	5.2 NAME
STREET ADDRESS 1307 W KENNEDY BLVD.	CITY-ST-ZIP TAMPA FL 33606	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE D	NAME LAURA F. FARRIOR	6.1 TITLE	6.2 NAME
STREET ADDRESS 1307 W KENNEDY BLVD.	CITY-ST-ZIP TAMPA FL 33606	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(j), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address, with a letter like empowered.

SIGNATURE:  James E Brakeman 4/22/99 (813) 251-2765
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)